

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Academy of Nutrition and Dietetics Political Action Committee

ADDRESS (number and street) ▼

1120 Connecticut Ave. NW

Suite 480

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00143560

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Paul A Mifsud

Signature of Treasurer

Mr. Paul A Mifsud

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Academy of Nutrition and Dietetics Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
10 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		169473.35
(b) Cash on Hand at Beginning of Reporting Period.....	180322.91	
(c) Total Receipts (from Line 19)	14504.00	114359.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	194826.91	283832.85
7. Total Disbursements (from Line 31)	0.00	89005.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	194826.91	194826.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Academy of Nutrition and Dietetics Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
10		31		2015

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6921.00

40329.00

(ii) Unitemized

7583.00

74030.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

14504.00

114359.50

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

14504.00

114359.50

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

14504.00

114359.50

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

14504.00

114359.50

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	12905.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	12905.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	76100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	89005.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	89005.94

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14504.00	114359.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14504.00	114359.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	12905.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	12905.94

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 30

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Marcia A Kyle

Mailing Address 146 Mystic Ave

City

Rockport

State

ME

Zip Code

04856-5730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Penbay Healthcare

Occupation

Clinical Dietitian Nutritionist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Transaction ID : AAC5D2F26347A438A871

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Mrs. Jessie M PavlinacMailing Address 808 SW Campus Dr
Ohsu 18

City

Portland

State

OR

Zip Code

97239-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Health & Science U

Occupation

Director, Clinical Nutrition

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Transaction ID : A69C4052B5ED14094B18

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Mr. Harold J HollerMailing Address 120 S Riverside Plz
Ste 2000

City

Chicago

State

IL

Zip Code

60606-6995

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy-staff

Occupation

Vice President, Governance & Practice

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Transaction ID : A8DBF4169386C4A64998

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

530.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Don W Bradley

Mailing Address Community and Family Medicine, Duk
& Fa 336

City State Zip Code
Durham NC 27710-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Senior Vice President for Healthcare a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A5B27625EC68D449F853

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Evelyn F Crayton RDN

Mailing Address 124 Elm Dr

City State Zip Code
Montgomery AL 36117-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Living Well Associates

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A4CB62853559C4649B54

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ms. Patricia J Becker

Mailing Address 205 Vanderbilt Ct

City State Zip Code
Durham NC 27705-1380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Unc Health Care System

Pediatric Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 02 / 2015

Transaction ID : AD59DDC9DEDE74975A19

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Debra G Hook

Mailing Address PO Box 310037

City

Fontana

State

CA

Zip Code

92331-0037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Solutions

Occupation

Pediatric Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A71193654D7504DA0858

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. Lorri Holzberg

Mailing Address 1330 University Dr
Apt 27

City

Menlo Park

State

CA

Zip Code

94025-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A19D7E752F5964B84A27

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mrs. Donna S Martin

Mailing Address 3067 Hillisdale Dr

City

Augusta

State

GA

Zip Code

30909-3427

FEC ID number of contributing
federal political committee.

C

Name of Employer

Burke County Board Of Educatio

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

10 / 02 / 2015

Transaction ID : AF7F6481AC7EA4C738B9

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 30
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Jennifer S DeHart RD

Mailing Address 1329 Chester St

City State Zip Code
Hoover AL 35226-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
St. Vincent Health System Regional Clinical Nutrition Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : ABB843936858647DE939

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Ms. Deanne S Brandstetter RDN

Mailing Address 49 Riverside Ave

City State Zip Code
Riverside CT 06878-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Compass Group Rdn

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : AE43CFF21652C4604A6D

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ms. Jeanne Blankenship RDN

Mailing Address 1713 Fairview Ave

City State Zip Code
Mc Lean VA 22101-4709

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Academy of Nutrition and Dietetics VP, Policy Initiatives & Advocacy

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : A33D2241FC1D5410AA6A

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Catherine Conway RD

Mailing Address 460 W 34th St
FI 11

City State Zip Code
New York NY 10001-2320

FEC ID number of contributing
federal political committee.

C

Name of Employer

YAI/NIPD

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A65D91C2B0BA54A10ADC

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Dorothy C Chen-Maynard RD

Mailing Address 4951 Mariposa Dr

City State Zip Code
San Bernardino CA 92404-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer

California State University San Bernar

Occupation

Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

10 / 02 / 2015

Transaction ID : ABA19A0B781AD477BA23

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Mrs. Elise A Smith

Mailing Address 159 Woodlands Glen Cir

City State Zip Code
Brandon MS 39047-7117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Systems Consulting

Occupation

Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

10 / 02 / 2015

Transaction ID : ABEA7D83F77FC40F8988

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

580.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 30

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Tracy L WilczekMailing Address 1731 Beacon St
Apt 322City State Zip Code
Brookline MA 02445-5324FEC ID number of contributing
federal political committee.

C

Name of Employer

Flik International

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2015**Transaction ID : A754B19E441AD4C4699D**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. Mary Pat RaimondiMailing Address 1120 Connecticut Ave NW
Ste 480City State Zip Code
Washington DC 20036-3989FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy-staff

Occupation

RD - Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2015**Transaction ID : AFE4AF89500154E65807**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ms. Christine M Reidy

Mailing Address 920 St. James Place

City State Zip Code
Park Ridge IL 60068-4654FEC ID number of contributing
federal political committee.

C

Name of Employer

Ada-staff

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2015**Transaction ID : A7770200B737B433FB4A**

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Catherine W Christie

Mailing Address 10168 Bishop Lake Rd W

City

Jacksonville

State

FL

Zip Code

32256-3413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ Of Florida

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 02 / 2015

Transaction ID : AB221C92FAE1E467DB30

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Ms. Charlotte A Hayes

Mailing Address 900 Lost Forest Dr

City

Atlanta

State

GA

Zip Code

30328-2159

FEC ID number of contributing
federal political committee.

C

Name of Employer

Team Novo Nordisk

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

374.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A7CE250AF837C4870980

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mrs. Denise A Andersen

Mailing Address 1411 Farmdale Rd

City

Saint Paul

State

MN

Zip Code

55118-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Private Consultant

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

10 / 02 / 2015

Transaction ID : AA301D1074C8B48BDA2C

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 30
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Teresa A Nece RDN

Mailing Address 7071 Oak Brook Dr

City

Urbandale

State

IA

Zip Code

50322-4800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

Director, Grassroots Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1495.00

Date of Receipt

10 / 02 / 2015

Transaction ID : A6998AA8EE13B426189B

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Ms. Aida C G Miles

Mailing Address 1300 S 2nd St
Ste 300

City

Minneapolis

State

MN

Zip Code

55454-1087

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Minnesota

Occupation

Program Contact

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

10 / 02 / 2015

Transaction ID : ABB4EFC38DCA547D2A24

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Sonja L Connor

Mailing Address 3181 SW Sam Jackson Park Rd
Oreg L607

City

Portland

State

OR

Zip Code

97239-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Health & Science U

Occupation

Research Associate Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

10 / 02 / 2015

Transaction ID : AB823BAAB75D649C2864

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

140.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Anna M Shlachter

Mailing Address 6845 Chesapeake Ct

City State Zip Code
 Gurnee IL 60031-5141

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 02 2015

Transaction ID : A381BC7736A6840EF966

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Ms. Trisha Fuhrman

Mailing Address 1932 Prospetor Ridge Dr

City State Zip Code
 Ballwin MO 63011-4808

FEC ID number of contributing federal political committee.

C

Name of Employer

Malnutrition Antagonists

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 02 2015

Transaction ID : A804D7A5F4BA741E59F6

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Ms. Aida C G Miles

Mailing Address 1300 S 2nd St
Ste 300

City State Zip Code
 Minneapolis MN 55454-1087

FEC ID number of contributing federal political committee.

C

Name of Employer

University of Minnesota

Occupation

Program Contact

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 03 2015

Transaction ID : ADE129F45631D459697A

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Kendra K Kattelman

Mailing Address Kathy R Elenkiwich Rotunda Lane, S
Swg 425

City State Zip Code
Brookings SD 57007-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Dakota State University

Occupation

Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2015

Transaction ID : A9FC843583DD4416F900

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. Tracy L Wilczek

Mailing Address 1731 Beacon St
Apt 322

City State Zip Code
Brookline MA 02445-5324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Flik International

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2015

Transaction ID : AF8D4DE8C2A6D471A880

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Mrs. Elise A Smith

Mailing Address 159 Woodlands Glen Cir

City State Zip Code
Brandon MS 39047-7117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Systems Consulting

Occupation

Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2015

Transaction ID : A1CA6475D37C1405B909

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 30

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Pepin TumaMailing Address 1120 Connecticut Ave NW
Ste 460

City	State	Zip Code
Washington	DC	20036-3953

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy Of Nutrition And

Occupation

Director, Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2015

Transaction ID : A003E7FCC88A840D899F

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Renee M Hinojosa

Mailing Address 1519 Palmer Dr

City	State	Zip Code
Laredo	TX	78045-1913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harris County Sherriff's Office

Occupation

Director Food & Nutr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2015

Transaction ID : AEC5858EEE3A84092AD3

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Karen T BelleskyMailing Address 4000 N Charles St
Apt 906

City	State	Zip Code
Baltimore	MD	21218-1762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chase Brexton

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2015

Transaction ID : AA13C36B17BE443D9AE4

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Karen T Bellesky

Mailing Address 4000 N Charles St
Apt 906

City Baltimore State MD Zip Code 21218-1762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chase Brexton

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.00

Date of Receipt

10 / 04 / 2015

Transaction ID : A11E3B41E57E5418CA77

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Ms. Amy L Richards

Mailing Address 538 University St
Dept UTM

City Martin State TN Zip Code 38237-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer

The University of Tennessee at Martin

Occupation

Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

10 / 04 / 2015

Transaction ID : A3C734366E1804C3BA29

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Mrs. Judy E Prager

Mailing Address 19 Cornell Rd

City New Fairfield State CT Zip Code 06812-3106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Well Fed Connecticut

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 04 / 2015

Transaction ID : A1E2EA4AB838F471B902

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 30
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Nancy Z Farrell

Mailing Address 5 Crystal Ct

City

Fredericksburg

State

VA

Zip Code

22405-5762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2015

Transaction ID : A46394C8AF83B4171BED

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mrs. Susan C Scott RDN

Mailing Address 532 Madison St.

c/o Peak Family Medicine

City

Huntsville

State

AL

Zip Code

35801-4205

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCS Nutrition Consulting, LLC

Occupation

Rdn

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2015

Transaction ID : AB1AE21D388E0493C848

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Janet S McKee

Mailing Address 1720 Lake Shore Dr

City

Orlando

State

FL

Zip Code

32803-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutritious Lifestyles

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2015

Transaction ID : ABE95EA16E2AA4D90A83

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

290.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Lorri Holzberg

Mailing Address 1330 University Dr
Apt 27

City State Zip Code
Menlo Park CA 94025-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2015

Transaction ID : A9FDB12B534C940C2ACB

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mrs. Lorraine E Matthews RDN

Mailing Address 304 Jefferson St

City State Zip Code
Whiteville NC 28472-3602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Columbus County Health Departm

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2015

Transaction ID : AA56A534A09BB469FAB4

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Ms. Teresa A Nece RDN

Mailing Address 7071 Oak Brook Dr

City State Zip Code
Urbandale IA 50322-4800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Academy Of Nutrition And

Director, Grassroots Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2015

Transaction ID : AA2925D8AD05A495DB36

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Trisha Fuhrman

Mailing Address 1932 Prosperor Ridge Dr

City State Zip Code
 Ballwin MO 63011-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Malnutrition Antagonists

Occupation
 Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1415.00

Date of Receipt

10 / 04 / 2015

Transaction ID : AC96376207DC1452D9B3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Mrs. Debra L King

Mailing Address 8045 Key Largo

City State Zip Code
 Belton TX 76513-5770

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Crown Consulting

Occupation
 Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

10 / 05 / 2015

Transaction ID : AE765FD8BC84040D595B

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Ms. Krista Yoder Latortue

Mailing Address 6000 Indian Creek Dr
 Apt 1401

City State Zip Code
 Miami Beach FL 33140-2360

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Family Food

Occupation
 Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

10 / 05 / 2015

Transaction ID : A55409F0440BA4CB48E0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Carla S Honselman PhD.

Mailing Address 317 E 1700th Rd

City

State

Zip Code

Casey

IL

62420-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Main Street R.D.

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 05 / 2015

Transaction ID : A9CD588160CDB4ABC9F2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Virginia J Dantone-Debarbieris RDN

Mailing Address 112 River Oaks Dr

City

State

Zip Code

La Place

LA

70068-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Nutrition Education Resources

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

10 / 05 / 2015

Transaction ID : A3F117297A9F44E92AA3

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Dr. Dorothy C Chen-Maynard RD

Mailing Address 4951 Mariposa Dr

City

State

Zip Code

San Bernardino

CA

92404-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

California State University San Bernar

Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

10 / 05 / 2015

Transaction ID : AAD45686B98A04E91AB2

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 30

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joyce A Gilbert

Mailing Address 406 Surrey Woods Dr

City

Saint Charles

State

IL

Zip Code

60174-2386

FEC ID number of contributing
federal political committee.

C

Name of Employer

J.a. Gilbert Associates

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 05 / 2015

Transaction ID : A34CA7EB0C1F74AE98EF

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Ms. Nancy Z Farrell

Mailing Address 5 Crystal Ct

City

Fredericksburg

State

VA

Zip Code

22405-5762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

10 / 05 / 2015

Transaction ID : A1629FB201F4241D59B9

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Mrs. Suzanne A M Ousey

Mailing Address 325 Crest Dr

City

San Jose

State

CA

Zip Code

95127-1606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Therapy Essentials

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

10 / 05 / 2015

Transaction ID : A59C1CB8A27EF4022B06

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1755.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 30
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Karen T BelleskyMailing Address 4000 N Charles St
Apt 906

City	State	Zip Code
Baltimore	MD	21218-1762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chase Brexton

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2015

Transaction ID : AE738BFE2DDB0431C970

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. H Leslie P Bain

Mailing Address 8000 Ensley Ln

City	State	Zip Code
Leawood	KS	66206-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : ACCA21B6DAB55452694D

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mrs. Christine K Weithman

Mailing Address 6 Spring Valley Rd

City	State	Zip Code
Natick	MA	01760-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Management Resources

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

Transaction ID : A9668A010176247018F4

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 30

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Terri J Raymond

Mailing Address 3011 80th Ave SE

City

Mercer Island

State

WA

Zip Code

98040-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer

DCS, LLC

Occupation

President/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			06			2015					

Transaction ID : AEAD8E45CB23B4D76A4E

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Carol M Brunzell

Mailing Address 10035 Conrad Ave

City

Inver Grove Heights

State

MN

Zip Code

55076-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fairview Uni. Med Cntr

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			06			2015					

Transaction ID : ACCAF430E742D4F37A88

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Marsha K Schofield

Mailing Address 4186 Cheval Cir

City

Stow

State

OH

Zip Code

44224-5229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Academy of Nutrition and Dietetics

Occupation

Director, Nutrition Services Coverage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			06			2015					

Transaction ID : A7787F08C55204886AEC

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

540.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Marcia A Kyle

Mailing Address 146 Mystic Ave

City

Rockport

State

ME

Zip Code

04856-5730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Penbay Healthcare

Occupation

Clinical Dietitian Nutritionist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

10 / 06 / 2015

Transaction ID : AF84094AE6DDB498C86E

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ms. Kathryn E Lawson

Mailing Address 1230 North Ave
Apt 4

City

Burlington

State

VT

Zip Code

05408-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer

Keurig Green Mountain, Inc

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 06 / 2015

Transaction ID : AA5C7D5610C2644268E5

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Dr. Kay N Wolf

Mailing Address 453 W 10th Ave

City

Columbus

State

OH

Zip Code

43210-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Ohio State University

Occupation

Program Contact

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

10 / 06 / 2015

Transaction ID : AE9C7B1ACEB624626B41

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Debra G Hook

Mailing Address PO Box 310037

City State Zip Code
 Fontana CA 92331-0037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutrition Solutions

Occupation

Pediatric Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

10 / 06 / 2015

Transaction ID : A84C79EFDB1CD4B5DB95

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mrs. Berit M Dockter RD

Mailing Address 2615 Dawson Ave

City State Zip Code
 Silver Spring MD 20902-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Abbott Nutrition

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 06 / 2015

Transaction ID : AA8787313211F42AC95C

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Ms. Brenda E Richardson

Mailing Address 4972 E Motsinger Rd

City State Zip Code
 Salem IN 47167-7759

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dietary Consultants

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.00

Date of Receipt

10 / 06 / 2015

Transaction ID : ACB2A797E23D24C09BC7

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Sandra A Morris RDN

Mailing Address 14405 State Road 120

City
BristolState
INZip Code
46507-9253FEC ID number of contributing
federal political committee.

C

Name of Employer

IU Health-Goshen Hospital

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y
10	06	2015

Transaction ID : A2FB75F69CB414B259DE

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ms. Manjushree Karkare

Mailing Address 4937 Cremshaw Ct

City
RaleighState
NCZip Code
27614-8322FEC ID number of contributing
federal political committee.

C

Name of Employer

Nutritionally Yours, LLC

Occupation

Rd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M	D D	Y Y Y Y
10	06	2015

Transaction ID : A03DD494CFF9A4FF5A39

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Tracy L WilczekMailing Address 1731 Beacon St
Apt 322City
BrooklineState
MAZip Code
02445-5324FEC ID number of contributing
federal political committee.

C

Name of Employer

Flik International

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M	D D	Y Y Y Y
10	06	2015

Transaction ID : A96F8CB8DE8DC424B88B

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

295.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 30
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Tammy M Beasley RDN

Mailing Address 3011 Basswood Way SE

City State Zip Code
 Brownsboro AL 35741-9391

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Castlewood Treatment Centers National Education Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 06 / 2015

Transaction ID : A28EC1F9AECC34D8A993

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. Mary Pat Raimondi

Mailing Address 1120 Connecticut Ave NW
 Ste 480

City State Zip Code
 Washington DC 20036-3989

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Academy-staff RD - Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

10 / 31 / 2015

Transaction ID : A9165253D05BE43E1BB2

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. Mrs. Julie H Haase RDN

Mailing Address 154 S 78th St

City State Zip Code
 Milwaukee WI 53214-1407

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Wheaton Franciscan Health Clinical Nutrition Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

10 / 31 / 2015

Transaction ID : AD33DB72553D541EC843

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Virginia J Dantone-Debarbieris RDN

Mailing Address 112 River Oaks Dr

City State Zip Code
La Place LA 70068-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Nutrition Education Resources

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

10 / 31 / 2015

Transaction ID : AFE1528AD31854611BA7

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Ms. Virginia J Dantone-Debarbieris RDN

Mailing Address 112 River Oaks Dr

City State Zip Code
La Place LA 70068-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Nutrition Education Resources

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

10 / 31 / 2015

Transaction ID : A35CEDC196C1F455F84E

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Mr. Paul A Mifsud

Mailing Address 120 S Riverside Plz
Ste 2000

City State Zip Code
Chicago IL 60606-6995

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Academy Of Nutrition And

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.00

Date of Receipt

10 / 31 / 2015

Transaction ID : AF8E1989890A641198FA

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Jessie M Pavlinac

Mailing Address 808 SW Campus Dr
Ohsu 18

City State Zip Code
Portland OR 97239-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Health & Science U

Occupation

Director, Clinical Nutrition

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2015

Transaction ID : A2839C77D9788436893F

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. Ms. Anne Marie Kimberling

Mailing Address 1905 Tipton Terrace

City State Zip Code
Columbia MO 65203-1654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rusk Rehabilitation Center

Occupation

Rdn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2015

Transaction ID : A776E1CD63EA342B7850

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.00

6921.00